しっここーロウ PART B - FEE(S) TRANSMITTAL

Express Mai	his form, fogether with	9 US	or <u>Fax</u>	Mail Stop ISSU Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	ratents inia 22313-1450	
INSTRUCTIONS: This appropriate. All further coindicated unless corrected	on should be used for trans espandence including the I below applied otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLI ders and notification ) specifying a new	CATION FEE (if requirement of maintenance fees we correspondence address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE	ns. CE ADDRESS (Note: Use Block 1 for a 590 09/01/2004			Note: A certificate of Fee(s) Transmittal. Th papers. Each additiona have its own certificate	mailing can only be used for is certificate cannot be used all paper, such as an assignment of mailing or transmission.	for any other accompanying ent or formal drawing, must
SENNIGER POV ONE METROPOL 16TH FLOOR ST LOUIS, MO 63		ID ROEDEL		I hereby certify that the States Postal Service vaddressed to the Mai	rtificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for The 1 Stop ISSUE FEE address TO (703) 746-4000, on the control	g deposited with the United as class mail in an envelope above, or being facsimile
10/25/2004 WABDELR3 00000108 10038084				Denise L. Wright (Depositor's name)		
01 FC:1501 1370.00 DP 300.00 DP				October 21	2004 bt	(Signature)
APPLICATION NO.	FILING DATE	FIRST NAMED INV		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/038,084	01/03/2002	Robert J. Fals		er	MEMC 98-3052 (2512.2)	7363
TITLE OF INVENTION: I AGGLOMERATED VACA	DEVICE LAYER OF A SIL ANCY-TYPE DEFECTS  SMALL ENTITY	ICON-ON-INSUL		RE HAVING VACANG	CY DOMINATED AND SU	BSTANTIALLY FREE OF
	NO NO			\$300		12/01/2004
nonprovisional NO		s1230 1370			\$1630 1,670 12/01/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS	J	
MAI, ANH D		2814		257-347000		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Senniger Powers  2  3			
3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i  (A) NAME OF ASSIGN	O RESIDENCE DATA TO B s an assignee is identified b n 37 CFR 3.11. Completion IEE	elow, no assignee of this form is NO	data will appear on T a substitute for file	t or type) the patent. If an assigning an assignment.  ITY and STATE OR CO		document has been filed for
	onic Materials,			s, Missouri	Corporation or other private gr	roup entity \( \int \) Government
4a. The following fee(s) are	e assignee category or catego		b. Payment of Fee(s)		corporation of other private g	toup chirty = covernment
Issue Fee	, choissed.		A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-1345 (enclose an extra copy of this form).			
a. Applicant claims S	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	☐ b. Applicant is	no longer claiming SMA	ALL ENTITY status. See 37 (	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) cords of the United States Page	ue Fee and Publica will not be accepte ont and Trademark	ntion Fee (if any) or d from anyone other c Office.	to re-apply any previous than the applicant; a reg	ly paid issue fee to the applic gistered attorney or agent; or	cation identified above. the assignee or other party in
Authorized Signature Delia Authorized Signature			Date			
Typed or printed name _	Richard A. Sch			_	n No. 47,929	
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313	ion is required by 37 CFR 1.3 lity is governed by 35 U.S.C application form to the USPT is for reducing this burden, signia 22313-1450. DO NOT 1-1450.	11. The informati. . 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR	on is required to obt 1.14. This collectio depending upon the Chief Information COMPLETED FOR	ain or retain a benefit by n is estimated to take 12 e individual case. Any c Officer, U.S. Patent and MS TO THIS ADDRES	the public which is to file (a minutes to complete, includ comments on the amount of the drademark Office, U.S. De S. SEND TO: Commissione	nd by the USPTO to process ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.